


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000161711 1. Entity Name FIVE STAR DISCOUNT JEWELRY, INC.	
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Principal Place of Business 11311 N. NEBRASKA AVE., BOOTH #E17 TAMPA, FL 33612	Mailing Address 11311 N. NEBRASKA AVE., BOOTH #E17 TAMPA, FL 33612
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DO NOT WRITE IN THIS SPACE



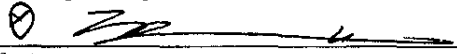
04122008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3929576	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent KIM, SUNG CHAN 1205 NE 163RD ST., #149 N. MIAMI BCH, FL 33612	DO NOT WRITE IN THIS SPACE
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. I am familiar with, and accept the obligations of registered agent.


SIGNATURE  DATE 4/27/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when resigning.)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		000000935545 05/23/08-80077-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KIM, SUNG CHAN 1205 NE 163RD ST., #149 N. MIAMI BCH, FL 33612	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KIM, JUNG H 6883 LUCCA ST. ORLANDO, FL 32819	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE 4/27/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR